

ATTACHMENT 1

**NOTICE OF INTENT (NOI) INFORMATION SHEET
NPDES GENERAL PERMIT FOR OIL AND GAS EXPLORATION FACILITIES
ON THE OUTER CONTINENTAL SHELF IN THE CHUKCHI SEA
(Permit Number AKG-28-8100)**

APPLICANT (<i>Owner/Operator</i>)					
Owner Name:		Operator Mailing Address:			
Telephone Number:					
Operator Name:					
Telephone Number:					
FACILITY					
Facility Name:		Facility Mailing Address:			
Contact Name:					
Telephone Number:					
Beginning Date of Operation:		Stationary Facilities	Latitude:		
Expected Duration of Operation:			Longitude:		
Facility Type (<i>check applicable type</i>)	<input type="checkbox"/>	Jackup	Mobile Facilities	Initial Latitude:	
	<input type="checkbox"/>	Drill Ship		Initial Longitude:	
	<input type="checkbox"/>	Semisubmersible			
	<input type="checkbox"/>	Other (specify):			
RECEIVING WATER					
<input type="checkbox"/>	Chukchi Sea	<input type="checkbox"/>	Other (<i>specify</i>): <input type="checkbox"/>		
LOCATION OF DISCHARGE					
BOEM	Lease Number				
	Block Number				
Range of water depths below mean lower low water (MLLW) in the lease block:		From:		To:	

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Discharges (check all that apply)					
<input type="checkbox"/>	001 Drilling Fluids and Drill Cuttings	Depth of Discharge:			
<input type="checkbox"/>	002 Deck Drainage	Depth of Discharge:			
<input type="checkbox"/>	003 Sanitary Waste	Depth of Discharge:			
<input type="checkbox"/>	004 Domestic Waste	Depth of Discharge:			
<input type="checkbox"/>	005 Desalination Unit Waste	Depth of Discharge:			
<input type="checkbox"/>	006 Blowout Preventer Fluid	Depth of Discharge:			
<input type="checkbox"/>	007 Boiler Blowdown	Depth of Discharge:			
<input type="checkbox"/>	008 Fire Control System Test Water	Depth of Discharge:			
<input type="checkbox"/>	009 Non-Contact Cooling Water	Depth of Discharge:			
<input type="checkbox"/>	010 Uncontaminated Ballast Water	Depth of Discharge:			
<input type="checkbox"/>	011 Bilge Water	Depth of Discharge:			
<input type="checkbox"/>	012 Excess Cement Slurry	Depth of Discharge:			
<input type="checkbox"/>	013 Mud, Cuttings, Cement and Seafloor	Depth of Discharge:			
Well Information					
Well Name:		Latitude:			
Well Number:		Longitude:			
Beginning Drill Date:		Hole Diameter or Estimated Total Discharge Volume:			
Drilling Fluids to be used in Well Drilling					
Category (check all that apply)	<input type="checkbox"/>	Water-based	Group (check all that apply)	<input type="checkbox"/>	Lignosulfonate
	<input type="checkbox"/>	Oil-based		<input type="checkbox"/>	Lime
	<input type="checkbox"/>	Synthetic-based		<input type="checkbox"/>	Gyp
	<input type="checkbox"/>	Other (specify):		<input type="checkbox"/>	Sea-water
Provide a description of the disposal practice of oil-based, synthetic-based, or other drilling fluids proposed to be used in well drilling.			<input type="checkbox"/>	Saltwater	
			<input type="checkbox"/>	Saturated Saltwater	
			<input type="checkbox"/>	Nondispersed (Viscosifier/Polymer) PH/PA	

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The applicant must submit the following information with the Notice of Intent.

Site Map	<input type="checkbox"/>	Included	Submit a site map showing the exact location of the facility and discharges associated with the project. Mobile facilities must indicate the intended areas of operation, a description of operations within those areas, and the initial latitude and longitude of the facility.
Initial Site Survey	<input type="checkbox"/>	Included	Submit an initial site survey, if available at NOI submittal date, documenting the drill site is not located in or near a sensitive marine environment.
Treatment Process/Disposal Practice	<input type="checkbox"/>	Included	Submit a detailed description of the disposal mechanism of the facility, the treatment processes, and disposal practices (e.g., backhauled, reinjected, discharged).
Line Drawing and Flow Balance	<input type="checkbox"/>	Included	Submit a line drawing that shows the flow, including rates/volumes of each discharged waste streams through facility. The line drawing must contain a flow balance showing average and maximum flow rates between intakes, operations, treatment units, and outfalls.
Discharge Rate/Volume	<input type="checkbox"/>	Included	Submit a table summarizing the discharge rates (e.g., volumes per day or per hour) for the requested waste streams per well and total volumes per well.
Environmental Monitoring Program (EMP) Plan of Study	<input type="checkbox"/>	Included	Submit an EMP Plan of Study (i.e., EMP design and detailed scope of work), including dilution, plume and deposition modeling (Section II.A.12.d.1).
Environmental Reports and Related Plans	<input type="checkbox"/>	Included	Provide copies of any exploration plans, biological surveys, and environmental reports required by other federal and state agencies.
Drilling Fluid Plan	<input type="checkbox"/>	Included	Submit a plan for the formulation and control of drilling fluid/chemical additive systems for each well.
Cooling Water Intake Structure Requirements	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Track I <input type="checkbox"/> Track II	Indicate whether the facility meets the applicability criteria, and if so, the applicant's intent to comply with either Track I or Track II requirements.

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Certification

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Signature:		Date:	
Printed Name:		Title:	

Mail Completed NOI to EPA at the following address:

US EPA
1200 6th Avenue, Suite 900, M/S OWW-130
Seattle, WA 98101